



DeSoto Memorial Hospital (DMH) 2023 – 2024 SBC Employee Acknowledgement Form

Employee Printed Name: _____

Summary of Benefits and Coverage (SBC) are important plan documents that provide you with an easy-to-understand summary about a health plan’s benefits and coverage. The new regulation is designed to help you better understand and evaluate your health insurance choices.

The new forms include:

- A short, plain language **S**ummary of **B**enefits and **C**overage, or SBC
- A uniform glossary of terms commonly used in health insurance coverage, such as "deductible" and "copayment"

All insurance companies and group health plans must use the same standard SBC form to help you compare health plans. The SBC form also includes details, called “coverage examples,” which are comparison tools that allow you to see what the plan would generally cover in two common medical situations. You have the right to receive the SBC when shopping for or enrolling in coverage or if you request a copy from your issuer or group health plan. You may also request a copy of the glossary of terms from your health insurance company or group health plan.

What This Means for You

It’s not easy for consumers to know what they are buying when shopping for insurance. The new rules are a joint effort among the Department of Health and Human Services, the Department of Labor, and the Department of the Treasury. The SBC is designed after the Nutrition Facts label required for packaged foods which helps you make healthy and informed decisions about your diet. The SBC’s standardized and easy to understand information about health plan benefits and coverage allows you to more easily make “apples to apples” comparisons among your insurance options. The measure brings more openness to the insurance marketplace for the more than 180 million Americans with private health coverage.

We offer the following plan that that has its own SBC:

Provider	Eligibility	Open Enrollment
DMH Health Benefits Plan	First of the month after 60 days of full-time employment	Annually in November / December time frame. January 1 effective date.



The Company is committed to providing the latest versions of the SBC on each of our plans via email. You should be aware that Summary of Benefits and Coverage are subject to change. Changes in the plan may supersede, modify, or eliminate the information summarized in the current SBC. When there is a material modification to a plan we will include those summaries in the back of the current posted plan or as a separate document next to the SBC – clearly marked as an addendum to a particular SBC. We will also communicate the change to employees via e-mail.

Summary of Benefits and Coverage (SBC) Employee Acknowledgement:

I understand and acknowledge...

1. That I have been informed that the SBC's on the plans outlined above are subject to change and that I should look for modifications or addendums when researching an issue or coverage level;
2. It is common for the group insurance providers on the medical and dental side, among other group carriers to change annually. These changes occur during open enrollment when the next year's benefits are offered to employees and employees may make changes to coverage levels or plan selections.
3. It is my responsibility to read the SBC for the various plans that I am covered under or eligible for and any material modifications to them;
4. I have the right today or at any time in the future to request paper copies from Human Resources of any SBC's I receive via electronic media, that I am eligible for or that I'm covered under.

Employee Signature: _____ Date: _____

Return signed acknowledgement form to:

DeSoto Memorial Hospital
Attn: Human Resource Director – Lois Hilton
900 N. Robert Ave
Arcadia, FL 34266

Phone: (863) 863-494-8408
e-mail: lhilton@dmh.org
Via fax to: (863) 494-8400